

Image# 201703029050593562

PAGE 1 / 2

# FEC FORM 2

## STATEMENT OF CANDIDACY

|   |   |  |
|---|---|--|
| 1. (a) Name of Candidate (in full)<br>Lucas, Frank, D., , |   |  |
| (b) Address (number and street)<br>RR2, Box 136           |   | <input type="checkbox"/> Check if address changed  |
| (c) City, State, and ZIP Code<br>Cheyenne OK 73628        |   | 2. Candidate's FEC Identification Number<br>H4OK06056  |
| 4. Party Affiliation<br>REPUBLICAN PARTY                  |   | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |
| 5. Office Sought<br>House                                 | 6. State & District of Candidate<br>OK 03 |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

|  |  |  |
|--|--|--|
| (a) Name of Committee (in full)<br>Lucas for Congress        |  |  |
| (b) Address (number and street)<br>PO Box 1726               |  |  |
| (c) City, State, and ZIP Code<br>Oklahoma City OK 73101-1726 |  |  |

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

|   |  |  |
|---|--|--|
| (a) Name of Committee (in full)<br>Barrasso-Lucas Committee             |  |  |
| (b) Address (number and street)<br>901 N Washington Street<br>Suite 700 |  |  |
| (c) City, State, and ZIP Code<br>Alexandria VA 22314-1535               |  |  |

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

|   |                    |
|---|--------------------|
| Signature of Candidate<br>Lucas, Frank, D., ,<br><br>[Electronically Filed] | Date<br>03/02/2017 |
|---|--------------------|

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|

**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC Form 2 (Rev. 02/2003)

Page 2 / 2

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Lucas-Roberts Victory Committee

(b) Address (number and street)

610 S Boulevard

(c) City, State and ZIP Code

Tampa

FL

33606-2693

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code